

# PAYEE APPLICATION FOR DETERMINATION OF CLAIMS

109/498261

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## CLAIMS AS AMENDED

| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT CLAIM |
|------------------------------------------------|----------------------------------|-------|------------------------------------|---------------|
|                                                | Total                            | Minus |                                    |               |
|                                                | Independent                      | Minus |                                    |               |
|                                                | 14                               |       | 20                                 | 0             |
|                                                | 3                                |       | 4                                  |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    |               |

|       |                |
|-------|----------------|
|       | ADDITIONAL FEE |
|       |                |
|       |                |
|       |                |
|       |                |
| TOTAL |                |

|       |                |
|-------|----------------|
|       | ADDITIONAL FEE |
|       |                |
|       |                |
|       |                |
|       |                |
| TOTAL |                |

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| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT CLAIM |
|------------------------------------------------|----------------------------------|-------|------------------------------------|---------------|
|                                                | Total                            | Minus |                                    |               |
|                                                | Independent                      | Minus |                                    |               |
|                                                | 10                               |       | 20                                 |               |
|                                                | 2                                |       | 4                                  |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    |               |

|       |                |
|-------|----------------|
|       | ADDITIONAL FEE |
|       |                |
|       |                |
|       |                |
|       |                |
| TOTAL |                |

|       |                |
|-------|----------------|
|       | ADDITIONAL FEE |
|       |                |
|       |                |
|       |                |
|       |                |
| TOTAL |                |

| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT CLAIM |
|------------------------------------------------|----------------------------------|-------|------------------------------------|---------------|
|                                                | Total                            | Minus |                                    |               |
|                                                | Independent                      | Minus |                                    |               |
|                                                |                                  |       |                                    |               |
|                                                |                                  |       |                                    |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    |               |

|       |                |
|-------|----------------|
|       | ADDITIONAL FEE |
|       |                |
|       |                |
|       |                |
|       |                |
| TOTAL |                |

|       |                |
|-------|----------------|
|       | ADDITIONAL FEE |
|       |                |
|       |                |
|       |                |
|       |                |
| TOTAL |                |

1. The "Total" column is the sum of the "Total" and "Independent" columns.  
 2. The "Highest Number Previously Paid For" column is the highest number previously paid for.  
 3. The "Present Claim" column is the present claim.  
 4. The "First Presentation of Multiple Dependent Claim" column is the first presentation of multiple dependent claim.

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